

# **TRAINEE/CONTROLLER EVALUATION**

For use of this form, see FM 3-04.303; the proponent agency is TRADOC.

<b>NAME</b>		<b>GRADE</b>	<b>ATCS NUMBER</b>	<b>EVALUATION NUMBER</b>		
<b>TYPE OF TRAINING</b>		<b>POSITION/FACILITY EVALUATED</b>		<b>TRAINING MONTH</b>		
<b>EVALUATION FACTOR</b>	<b>EXPECTED PERFORMANCE/REMARKS</b>			<b>SAT</b>	<b>NEEDS IMPROV</b>	<b>UNSAT</b>
<b>A. SEPARATION</b>	1. Separation is ensured.					
<b>B. CONTROL JUDGEMENT</b>	2. Awareness is maintained.					
	3. Good control judgement is applied.					
	4. Control actions are correctly planned.					
	5. Positive control of situations is provided.					
<b>C. TRAFFIC MANAGEMENT</b>	6. Prompt action to correct errors is taken.					
	7. Effective traffic flow is maintained.					
	8. Aircraft identity is maintained.					
	9. Professionalism is maintained.					
<b>D. OPERATING METHODS AND PROCEDURES</b>	10. Flight strip postings are correct and complete.					
	11. Clearance delivery is correct/complete/timely.					
	12. Letters of agreement/directives are adhered to.					
	13. Navigational assistance is provided.					
<b>E. COORDINATION AND COMMUNICATION</b>	14. Weather information is provided.					
	15. Handoff procedures are correctly performed.					
	16. Necessary traffic advisories are provided.					
	17. Coordination is thorough.					
<b>F. PHRASEOLOGY</b>	18. Communication is clear and concise.					
	19. Necessary transmissions are made.					
	20. Standard phraseology is adhered to					
	21. Voice quality is good.					
<b>G. EQUIPMENT</b>	22. Speech rate is correct.					
	23. Equipment capabilities are fully understood/used.					
	24.					
<b>H. OTHER (Specify)</b>	25.					
	26.					
	27.					
	28.					
29.						
<b>TRAFFIC CONDITION</b> (Check one block in each column.)		<input type="checkbox"/> Light <input type="checkbox"/> Stable <input type="checkbox"/> Moderate <input type="checkbox"/> Fluctuating <input type="checkbox"/> Heavy		<b>OVERALL RATING</b>		

EVALUATOR COMMENTS	DATE
TYPED/PRINTED NAME AND GRADE	SIGNATURE
CONTROLLER/TRAINEE COMMENTS	DATE
THE UNDERSIGNED <input type="checkbox"/> AGREES <input type="checkbox"/> DISAGREES <small>(If you disagree with the evaluation, refer to specific items of contention in your comments.)</small>	
TYPED/PRINTED NAME AND GRADE	SIGNATURE
REVIEWING AUTHORITY COMMENTS	DATE
TYPED/PRINTED NAME, GRADE, AND TITLE	SIGNATURE